IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Albertson et.al.	Attorney Docket No.: UCOTP089 / 1999-140-1
Application No.: 09/285,292	
	Examiner: Harris, Alana M.
Filed: 04/02/1999	
	Group: 1643
Title: CYP24 EXPRESSION LEVEL AS A MARKER FOR PREDISPOSITION TO CANCER	Confirmation No.: 3543

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	17	MINUS	70	0	x 25 =	x 50 =
Independent Claims	01	MINUS	05	0	x 105 =	x 210 =
Multiple Dependent Claim Present and Fee Not Previously Paid						
				Total	$	$

☒ Applicant(s) hereby petitions for a <u>One</u> month extension(s) of time to respond to the aforementioned Office Action.

☐ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 504480.

☐ Enclosed is our Check No. ____ in the amount of $ ____ to cover the additional claim fee and/or extension of time fees.

☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 504480 (Order No. <u>UCOTP089</u>).

Respectfully submitted,
Weaver Austin Villeneuve & Sampson LLP

/Emily M. Haliday/

Emily M. Haliday
Reg. No. 38,903

P.O. Box 70250
Oakland, CA 94612-0250